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Application Number	10/756,525
Filing Date	1/13/2004
First Named Inventor	Nady E. Nady
Title	Device for Spreading and Holding Op
Art Unit	3732
Examiner Name	Comstock, David C.
Attorney Docket Number	RWJ 05-69

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	1/19/06
Name	Nady E. Nady	Telephone	732-235-6631
Title and Company	University of Medicine and Dentistry of New Jersey		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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